

CLAIMS ONLY

Application Number
101084237

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
6						
7						
8						
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37						
38						
39						
40						
41						
42						
43						
44						
45						
46	1					
47		1				
48						
49						
50						
Total Indep						
Total Depend						
Total Claims						

	*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
53						
54						
55	1					
56						
57						
58						
59						
60						
61						
62						
63						
64						
65	1					
66						
67						
68						
69						
70						
71						
72						
73	1					
74						
75						
76						
77						
78						
79						
80						
81						
82	1					
83						
84						
85						
86	1					
87	1					
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
Total Indep	17					
Total Depend	36					
Total Claims	43					